

CCRB INVESTIGATIVE RECOMMENDATION

Investigator: Eric Murdy (I)	Team: Intake	CCRB Case #: 201403021	<input checked="" type="checkbox"/> Force	<input checked="" type="checkbox"/> Discourt.	<input type="checkbox"/> U.S.
			<input checked="" type="checkbox"/> Abuse	<input type="checkbox"/> O.L.	<input type="checkbox"/> Injury
Incident Date(s) Saturday, 03/22/2014 12:45 AM	Location of Incident: Fort Tryon Park	Precinct: 34	18 Mo. SOL 9/22/2015	EO SOL 9/22/2015	
Date/Time CV Reported Mon, 03/31/2014 1:38 PM	CV Reported At: CCRB	How CV Reported: Call Processing System	Date/Time Received at CCRB Mon, 03/31/2014 1:38 PM		

Complainant/Victim	Type	Home Address

Subject Officer(s)	Shield	TaxID	Command
1. DTS Craig Jacob	5974	935049	PBMN TF
2. POM Frank Mosca	18393	937882	PBMN TF

Officer(s)	Allegation	Investigator Recommendation
A.POM Frank Mosca	Force: PO Frank Mosca pointed his gun at § 87(2)(b)	
B.POM Frank Mosca	Abuse: PO Frank Mosca threatened § 87(2)(b) with the use of force.	
C.DTS Craig Jacob	Abuse: DT Craig Jacob searched § 87(2)(b)	
D.POM Frank Mosca	Discourtesy: PO Frank Mosca spoke rudely to § 87(2)(b)	

Case Summary

§ 87(2)(b) filed this complaint with the CCRB on March 31, 2014 via the Call Processing System. On March 31, 2014 a call was made to § 87(2)(b) and a voicemail was left. A subsequent call was made on April 3, 2014, at which time § 87(2)(b) provided a phone statement and scheduled an interview for April 10, 2014. On April 10, 2014, § 87(2)(b) called the CCRB and left a message stating he would like to be rescheduled. Three subsequent calls were made between the dates of April 10, 2014 and April 24, 2014. Voicemails were left on each occasion. § 87(2)(b) was sent two letters on March 31, 2014 and April 24, 2014. No letters have been returned to the CCRB.

To date, § 87(2)(b) has failed to schedule an interview and has not responded to subsequent contact attempts. § 87(2)(g)

Team: _____

Investigator: _____
Signature _____ Print _____ Date _____

Supervisor: _____
Title/Signature _____ Print _____ Date _____

Reviewer: _____
Title/Signature _____ Print _____ Date _____

Reviewer: _____
Title/Signature _____ Print _____ Date _____